

EXHIBIT 2

Articles of Organization

**OFFICE OF THE SECRETARY OF STATE**

JESSE WHITE - Secretary of State

01400738

JANUARY 20, 2005

Firm: IL CSC
Contact Person: LISA HUGHES
Amount Charged: \$600.85

RE: AIRDIS, LLC

Dear Sir or Madam:

It has been our pleasure to approve and place on record the Articles of Organization that created your Limited Liability Company. We extend our best wishes for success in your new future.

The Limited Liability Company must file an Annual Report prior to the first day of its anniversary month next year. A pre-printed Annual Report form will be sent to the registered agent at the address shown on the anniversary month.

Due to statutory changes in the Limited Liability Company Act, Certificates of Organization will no longer be issued with the Articles of Organization.

Sincerely yours,

Jesse White
Secretary of State

Department of Business Services
Limited Liability Company Division
Telephone (217) 524-8008

Form **LLC-5.5**
December 2003**Illinois**
Limited Liability Company Act
Articles of OrganizationThis space for use by
Secretary of StateJesse White
Secretary of State
Department of Business Services
Limited Liability Company Division
Room 951, Howlett Building
Springfield, IL 62766
http://www.cyberdriveillinois.comPayment must be made by certified
check, cashier's check, Illinois
attorney's check, Illinois C.P.A.'s check
or money order, payable to "Secretary
of State."**SUBMIT IN DUPLICATE**

Must be typewritten

This space for use by Secretary of State

01/20/2005

Date
Assigned File # 0140 073 8

Filing Fee \$500.00

Approved: PMM

FILE DATE 01/20/2005

Jesse White

Secretary of State

1. Limited Liability Company Name:
- Airdis, LLO

(The LLC name must contain the words limited liability company, LLC, or LLO and cannot contain the terms corporation, corp., incorporated, inc., ltd., co., limited partnership, or LP.)

2. The address of its principal place of business: (Post office box alone and c/o are unacceptable.)
-
- 246 E. Janata Blvd.

Lombard, IL 60148

3. The Articles of Organization are effective on: (Check one)

a) ☒ the filing date, or b) _____ another date later than but not more than 60 days subsequent
to the filing date: _____
(month, day, year)

4. The registered agent's name and registered office address is:

Registered agent:	<u>Harry</u>	<u>E.</u>	<u>Bartosiak</u>
	<small>First Name</small>	<small>Middle Initial</small>	<small>Last Name</small>
Registered Office:	<u>2100 Manchester Road, Suite 950</u>		
(P.O. Box and c/o are unacceptable)	<u>Wheaton,</u>	<u>IL</u>	<u>60187</u>
	<small>City</small>	<small>State</small>	<small>ZIP Code</small>
		<u>DuPage</u>	
		<small>County</small>	

5. Purpose or purposes for which the LLC is organized: Include the business code # (IRS Form 1065),
-
- (If not sufficient space to cover this point, add one or more sheets of this size.) 513300

"The transaction of any or all lawful business for which limited liability companies may be organized under
this Act."

and to provide telecommunication services and related services to consumers.

6. The latest date, if any, upon which the company is to dissolve
- perpetual
-
- (month, day, year)

Any other events of dissolution enumerated on an attachment. (Optional)

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7. Other provisions for the regulation of the internal affairs of the LLC per Section 5-5 (a) (B) included as attachment:

If yes, state the provisions(s) from the ILLCA.

☐ Yes

☒ No

8. a) Management is by manager(s);
If yes, list names and business addresses.

☒ Yes

☐ No

Scott Sinclair
246 E. Janata Blvd.
Lombard, IL 60148

- b) Management is vested in the member(s);
If yes, list names and addresses.

☐ Yes

☒ No

9. I affirm, under penalties of perjury, having authority to sign hereto, that these articles of organization are to the best of my knowledge and belief, true, correct and complete.

Dated January 19, 2005
(Month/Day) (Year)

Signature(s) and Name(s) of Organizer(s)

Address(es)

1. Harry E. Bartosiak, Attorney & Organizer
(Type or print name and title)

1. 2100 Manchester Rd. Suite 950
Wheaton
City/Town

IL 60187
State ZIP Code

2. _____
Signature
(Type or print name and title)

2. _____
Number Street
City/Town

State ZIP Code

3. _____
Signature
(Type or print name and title)
(Name if a corporation or other entity)

3. _____
Number Street
City/Town
State ZIP Code

(Signatures must be in ink on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

LLC-13

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